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Authorization	the Privacy Act of 1974 and hereby authorize S	derstand my personal information is protected under enator Edward J. Markey to obtain the necessary es and departments in order to act on my behalf. Date
t on	Name:	
Contact Information	Current Address:	
In (Daytime Telephone:	Email:
Beneficiary Information	Full Name:	
	Alien Registration Number:	
	Date of Birth:	
	Type of Application:	
	Case or Receipt Number:	
	Where is your case pending?	
Beneficia	Brief Description of the Situation:	
	You may also include copies of any relevant documents.	

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